

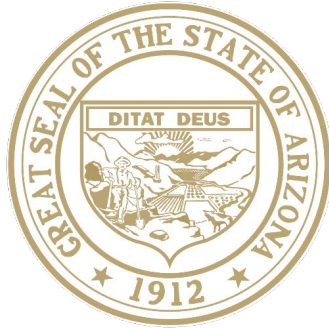
Retiree Benefits Meeting

The meeting will begin at 11 a.m.

Enrollment guides were mailed the week of September 28th, if you have not received your copy yet, the guide is available on our website. A link to the guide and a FAQ document are also included in the meeting invitation.

If you need to ask questions on specific information, please contact us directly at (602) 542-5008 or (800) 304-3687 or email benefitsissues@azdoa.gov.



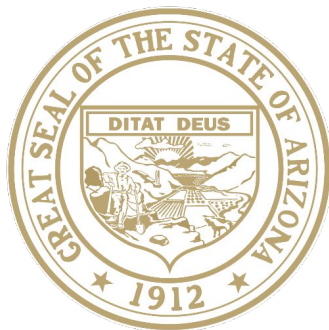


Benefit Options

**Benefit Program for State of Arizona Retirees
Offered by the Arizona Department of Administration
Human Resources Division - Benefits**

Agenda

- Open Enrollment 2021
- Benefits Overview
- Medical Vendor Presentations
- How to Enroll



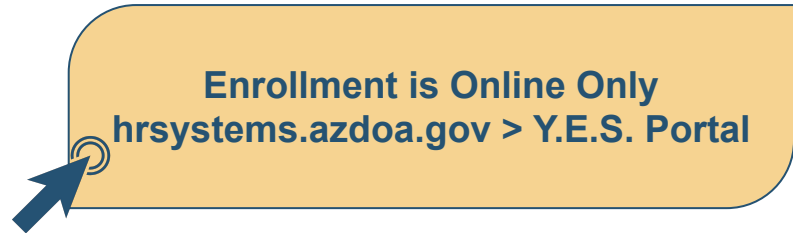
Open Enrollment 2021

You Must Enroll Online for All Plans

Open Enrollment 2021

October 19 to November 6 at 5 p.m. (AZ Time)

- ✓ Medical
- ✓ Dental
- ✓ Vision



Benefit Changes for 2021

Medical

- New Triple Choice Plan
 - Replaces EPO & PPO Plans
- New Premium
- Carrier change
 - BlueCross BlueShield of AZ
 - UnitedHealthcare

Pharmacy

- New Mail Order & Specialty Vendor

Dental

- No plan changes
- New Plan Name for Cigna DHMO:
 - Cigna Dental Care Access

Vision

- Premium Reduction
- Discount Plan will be discontinued

Benefits Info - Web

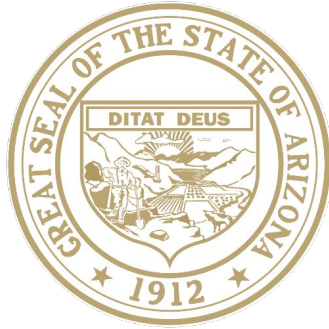
benefitoptions.az.gov

- **Key Tabs**
 - **Open Enrollment 2021**
 - **Contacts > Vendors**
- No password, share site with family
- Web and mobile

Enrollment Guide

- **Rates**
- **Plan Information**
- **Custom Vendor Contact Info for State Enrollees**





Medical Plan Options

Health Insurance Terms

Premium

Amount you pay for insurance each month

Deductible

Expenses you pay out-of-pocket *before* the health plan pays

- Individual or Family
- Separate In- & Out-of-Network amounts
- Accumulate toward out-of-pocket maximum

Deductible Met

Copayment

Fixed dollar amount

Coinsurance

Percentage of allowed amount

- You pay at the time of service after the deductible is met
- Plan pays remaining charges
- Accumulate toward out-of-pocket maximum

Out-of-Pocket Max Met

Out-of-Pocket Maximum

The most you will pay in combined deductibles, and health care and pharmacy copayments

- Plan pays 100% of covered services after out-of-pocket max is met
- Individual or Family
- Separate In- & Out-of-Network amounts

Medical Plan Features

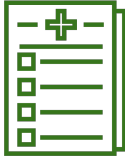
	Triple Choice Plan
Premium	New
Deductible	Tier 1, Tier 2, Tier 3
Nationwide network of providers	Tier 1 & Tier 2
Out-of-Network Coverage (higher cost)	Tier 3
Primary Care Physician (PCP) not required	✓
No referrals required to see a specialist	✓
Preventive care in-network	Free

Preventive Care Services



Regular Visits

Well-baby, Well-child,
Well-man, Well-woman



Tests

Blood Pressure, Diabetes,
Cholesterol

Intervention



Smoking Cessation,
Depression Screening,
Unhealthy Alcohol &
Drug Use Screening,
Weight Loss Counseling



Immunizations

Flu, Pneumonia,
Varicella, Shingles



Cancer Screenings

Mammogram, Colonoscopy,
Cervical, Prostate

Preventive care services are free only when using an in-network provider

Medical Plan Cost



Triple Choice Plan Monthly Premium			
Without Medicare		With Medicare	
Retiree Only	\$708.53	Retiree Only	\$528.11
Retiree + One	\$1,657.21	Retiree + One (both Medicare)	\$1,049.05
Retiree + Family	\$2,233.12	Retiree + One (one Medicare)	\$1,233.49
		Retiree + Family	\$1,393.16
Deductible		Tier 1	Tier 2
Retiree Only		\$200	\$1,000
Retiree + One		\$400	\$2,000
Retiree + Family			
Out-of-Pocket Maximum		Tier 3	
Retiree Only		\$7,350 Tier 1 & Tier 2 Combined	
Retiree + One		\$14,700 Tier 1 & Tier 2 Combined	
Retiree + Family			

Tier 1 & Tier 2, the deductibles will cross-apply:

- Tier 1 deductible applies to Tier 2 and Tier 2 deductible applies to Tier 1

Medical Plan Cost



No changes to
the Hearing Aid
benefit!

Routine Preventive Services
Primary Care Physician (PCP)
Specialist
Telehealth Services (Virtual Visit)
Emergency Room
Urgent Care
Inpatient Hospital Admission
Laboratory and X-Ray Services
Major Radiology Services

Triple Choice Plan		
Copayment Applies <u>After</u> Deductible is Met		
Tier 1	Tier 2	Tier 3
\$0	\$0	50%
\$20	\$20	50%
\$40	\$40	50%
\$20	\$20	50%
\$200	\$200	\$200
\$75	\$75	50%
\$250	\$250	50%
\$0	\$0	50%
\$100	\$100	50%

How to Use the Triple Choice Plan

1 Choose a network doctor

Look for the Tier 1 symbol for the lowest cost



Tier 1



2 Pay a deductible

Your first out-of-pocket expense before the plan pays

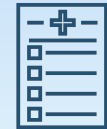
3 Pay a copayment

You pay a flat fee  Your plan pays the rest

4 Pay up to out-of-pocket max

Your plan pays 100% of services for remainder of the year

- Physicians
- Radiology and Laboratory
- Hospitals
- Urgent care facilities
- Surgical centers
- Rehabilitation centers

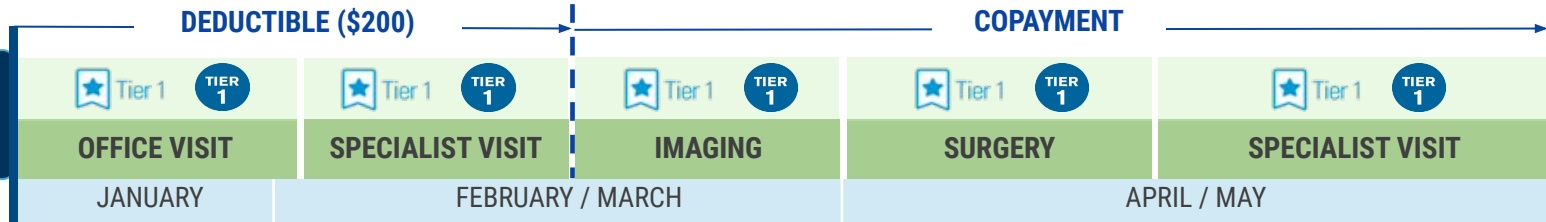


How to Use the Triple Choice Plan

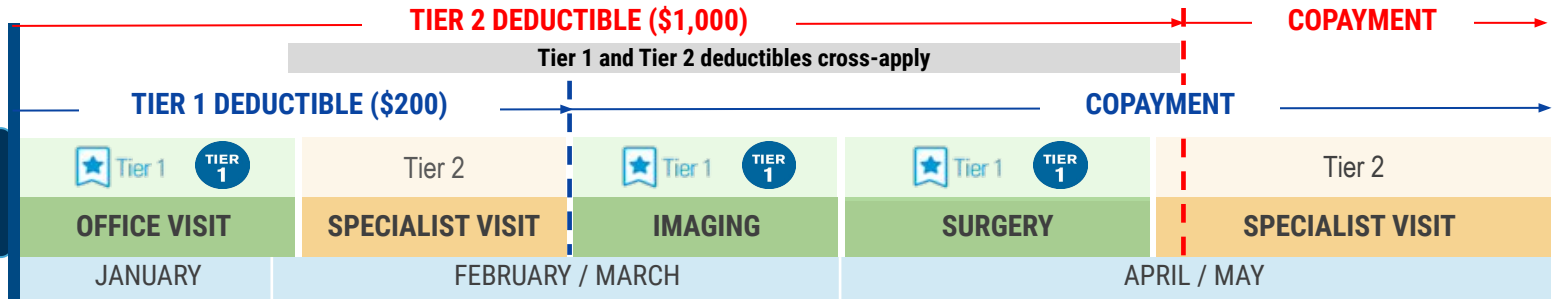
Tier 1 doctors and facilities
Provide higher quality
and efficient care



Using **ONLY**
Tier 1 providers



Using **Tier 1** and
Tier 2 providers



Note: Examples are using the Retiree Only Plan

What to Consider When Choosing a Plan

Benefits

- The same benefit structure for each carrier
- Value added benefits vary among carriers
 - Health and wellness services

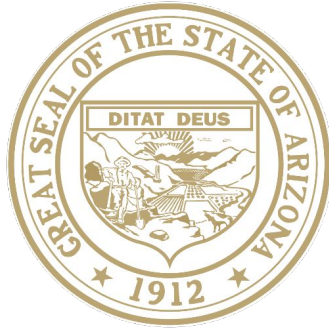
Networks

- Both carriers have nationwide networks
- Provider networks vary
- Make sure your providers are on the plan
- Look for the symbols



Cost

- Understand how premiums & deductibles work for your budget
- Out-of-Network costs are higher



Pharmacy Benefits

Same Pharmacy for both Carriers

- Pharmacy Benefit Administrator
- Maintains the formulary, pharmacy network, and drug costs



Pharmacy Information

- **On your medical card**
- Prescription drugs are covered In-Network only
- Medical carrier **is not** the pharmacy administrator
- Pharmacy website: [medimpact.com](https://www.medimpact.com)
- Find a pharmacy near you with the best price
- View prescription drug information and prescription history
- View your accumulators & YTD drug spend

Prescription Drug Copays



- MedImpact Direct will be replacing AllianceRx Walgreens
- Copays apply toward your out-of-pocket maximum
- Refer to Summary Plan Document for more about Prescription Drugs

	Retail (30-Day Supply)	Retail (90-Day Supply)	Mail Order (90-Day Supply)
Generic	\$15	\$37.50	\$30
Preferred Brand	\$40	\$100	\$80
Non-Preferred Brand	\$60	\$150	\$120

Prescription Drug Plan - Medicare

Same Pharmacy for both Carriers

- Pharmacy Benefit Administrator
- Maintains the formulary, pharmacy network, and drug costs



Pharmacy Information

- **You will receive a new VibrantRx card in the mail**
- Prescription drugs are covered In-Network only
- Medical carrier **is not** the pharmacy administrator
- Pharmacy website: myvibrantRx.com/stateofaz
- Find a pharmacy near you with the best price
- View prescription drug information and prescription history
- View your accumulators & YTD drug spend

Prescription Drug Copays - Medicare

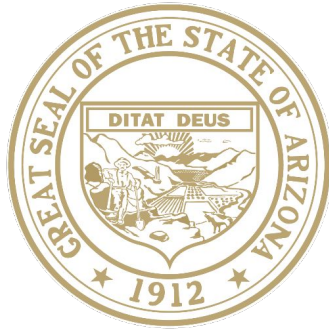


- MedImpact Direct will be replacing AllianceRx Walgreens
- Copays apply toward your out-of-pocket maximum
- Refer to Summary Plan Document for more about Prescription Drugs

	Retail (30-Day Supply)	Retail (90-Day Supply)	Mail Order (90-Day Supply)
Tier 1: Generic	\$15	\$37.50	\$30
Tier 2: Preferred Brand	\$40	\$100	\$80
Tier 3: Non-Preferred Brand	\$60	\$150	\$120
Tier 4: Specialty (over \$670) ¹	\$60	Not Available	Not Available



¹ Total medication cost





Voluntary Benefits

Dental Plans

	PPO Plan  DELTA DENTAL®	Dental HMO  Cigna®
Network	Delta PPO Plus Premier Dentist	Cigna Dental Care Access
Monthly Premium		
Retiree Only	\$35.94	\$8.52
Retiree + Adult	\$75.63	\$17.04
Retiree + Child	\$60.48	\$16.59
Retiree + Family	\$118.26	\$25.54
Type of Plan	<ul style="list-style-type: none"> ○ Provider charges negotiated rates ○ You pay a coinsurance ○ Nationwide coverage 	<ul style="list-style-type: none"> ○ Provider accepts set fees from Cigna ○ You pay set fees for dental work ○ Not available in all states
Preventive Services	Covered 100%	No Copay
Deductibles	Retiree-\$50, Retiree+Spouse-\$100 Retiree+1 Child-\$100, Family-\$150	None
Maximum Benefit	\$2,000 per person per year	None

When choosing a plan, consider your dental history, level of care needed, costs and budget

Vision Plan

Avesis Advantage Program

Premiums per pay Quarter	
Retiree Only	\$11.16
Retiree + Spouse	\$37.08
Retiree + 1 Child	\$36.72
Family	\$46.20
Retiree Cost for Care	
Routine Eye Exam	\$10
Standard Spectacle Lenses:	
○ Single Vision, Bifocal, Trifocal, Lenticular	Covered in full
○ Progressive	Discounted
Frame	Up to \$150 retail value (\$50 wholesale cost allowance)
Contact Lenses (in lieu of frame/spectacle lenses):	
Elective	10-20% discount & \$150 allowance
Medically Necessary	Covered in full
LASIK/PRK	Up to \$750

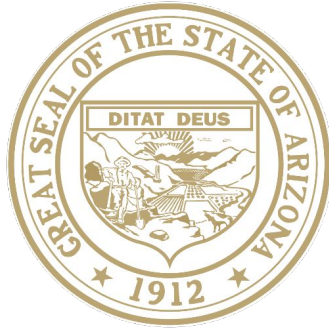
Target Optical Discount!

Save an additional \$25 when you purchase your frame from Target Optical

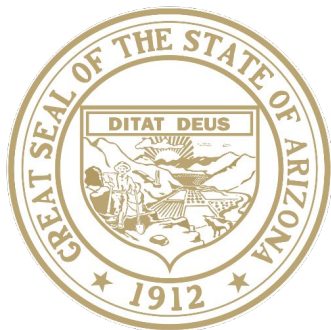


Avesis bills you directly for quarterly premiums

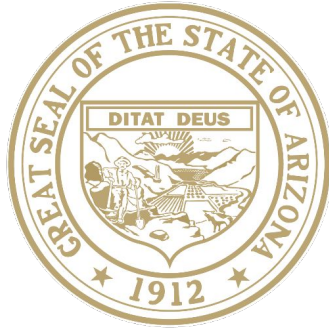
2021 - Billing Cycle	Invoice Date	Premium Due Date
1st Qtr (Jan, Feb, Mar)	1/15/2021	2/26/2021
2nd Qtr (Apr, May, Jun)	3/15/2021	4/30/2021
3rd Qtr (Jul, Aug, Sept)	6/15/2021	7/30/2021
4th Qtr (Oct, Nov, Dec)	9/15/2021	10/29/2021



BlueCross BlueShield of AZ



UnitedHealthcare

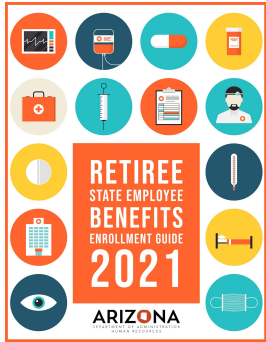


Enrollment

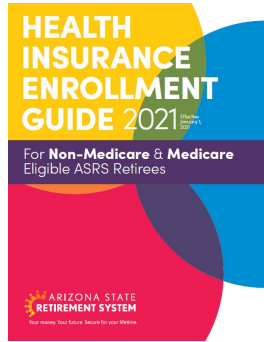
How To Enroll

Understand Your Options

- Visit our website: **benefitoptions.az.gov/OE2021**
- Review Enrollment Guide, rates & coverage
- Watch informational videos



ADOA Enrollment Guide



ASRS Enrollment Guide

Enroll Starting Oct. 19

- **Retirees must enroll through Y.E.S.**
 - Visit our website: **benefitoptions.az.gov**
 - Click **Retiree / LTD** tab
 - Click **Retiree Self Service**
 - Click **Retiree Self-Service Login**
 - Log into **Portal Login for Y.E.S.**
 - Click **Open Enrollment**
- Paper forms will not be accepted
- Follow the steps to enroll
- Save your confirmation email



How To Enroll

Password Reset Process

- The HRIS Service Desk can no longer reset your password on your behalf, please follow the instructions located in the Retiree Password Reset Quick Guide you received in the mail

Supported Browsers

- Please ensure you have one of the following browsers available during Open Enrollment
 - Internet Explorer is no longer supported
 - iPhones and iPads are not supported; only can use Macbook

**Google
Chrome**



**Microsoft
Edge Chromium**



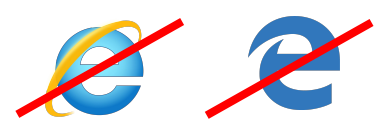
**Apple
Safari**



**Mozilla
Firefox**



**No Microsoft Edge or
Internet Explorer**



How To Enroll

Demographic Information

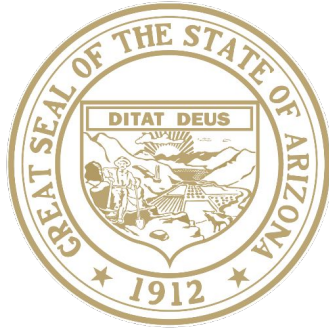
- You are required to validate and update demographic information so we can communicate efficiently with you about your benefits

Dependent Social Security Numbers (SSN)

- Correct SSN's for dependents are required

Dual Coverage

- Duplicate enrollment in State plans is prohibited and will be terminated with no refunds for the premiums paid. For spouses or dependents who are State Employees, State University Employees, and/or Retirees, specific rules apply. Please refer to your enrollment guide for specific details.



Survey

<http://bit.ly/OE21RSur>

Key Contact Information

Survey link: <http://bit.ly/OE21RSur>



Enrollment - yes.az.gov



Info & Rates - benefitoptions.az.gov



Member Services - Mon-Fri 8a-5p
(602) 542-5008 or (800) 304-3687



benefitsissues@azdoa.gov

